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PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

## IN THE UNITED STATES DISTRICT COURT FOR THE Southern DISTRICT OF TEXAS Houston DIVISION

MARCUS TAMERSON 1704730 Plaintiff's Name and ID Number	MAY 20 2020							
O.L. LUTHER UNIT-TDCJ Place of Confinement	David & Bradley, Clerk of Count							
UTMB Sr. Practice Manager v. KOLTON STOKER-sued In his i	CASE NO(Clerk will assign the number) ndividual capacity							
1900 Luther Dr. Vaugsola, TV 17868 Defendant's Name and Address	JURY TRIAL DEMANDED							
Defendant's Name and Address								
Defendant's Name and Address ( DO NOT USE "ET AL.")								
INSTRUCTIONS - READ CAREFULLY								

#### **NOTICE:**

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

- 1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
- 2. Your complaint must be <u>legibly</u> handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, <u>DO NOT USE THE REVERSE</u> <u>SIDE OR BACKSIDE OF ANY PAGE</u>. ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
- 3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
- 4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

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#### FILING FEE AND IN FORMA PAUPERIS (IFP)

- 1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of \$400.00.
- 2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at you prison unit.
- 3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or a initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from you inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
- 4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

#### **CHANGE OF ADDRESS**

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE OF THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

I.	PREV	IOU	IS LAWSUITS:
	A.	Ha	ve you filed $\mathit{any}$ other lawsuit in state or federal court relating to your imprisonment?YES $\underline{\hspace{0.1cm} V}$ NO
B. If your answer to "A" is "yes", describe each lawsuit in the space below. (If there lawsuit, describe the additional lawsuits on another piece of paper, giving the same			
	-	1.	Approximate date of filing lawsuit:
		2.	Parties to previous lawsuit:
			Plaintiff(s)
			Defendant(s)
		3.	Court: (If federal, name the district; if state, name the county.)
		4.	Cause number:
		5.	Name of judge to whom case was assigned:
		6.	Disposition: (Was the case dismissed, appealed, still pending?)
		7	Approximate date of disposition:

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II.	PLACE OF PRESENT CONFINEMENT: O.L. Luther Unit
III.	EXHAUSTION OF GRIEVANCE PROCEDURES:
	Have you exhausted all steps of the institutional grievance procedure?    ✓ YESNC
	Attach a copy of your final step of the grievance procedure with the response supplied by the institution
IV.	PARTIES TO THIS SUIT:
	A. Name and address of plaintiff: Marcus Jamerson O.L. Lyther Unit
	1800 Lather Dr. Naugsota, Tx 77868-TDCJ
	B. Full name of each defendant, his official position, his place of employment, and his full mailing address
	Defendant #1: KOLTON STOKER Sr. Practice Manager at UTMB
	Medical, Luther Unit, 1800 Luther Dr. Navasota, Tx 77868
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
	The defendant assessed a medical fee on my account for chronic core vir
	Defendant #2:
	Briefly describe the acts(s) or omission(s) of this defendant which you claimed harmed you.
	Defendant #3:
	Briefly describe the acts(s) or omission(s) of this defendant which you claimed harmed you.
	Defendant #4:
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
	Defendant #5:
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
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VIII. SANCTIONS:

2. Case number:

3. Approximate date sanctions were imposed:

4. Have the sanctions been lifted or otherwise satisfied?

V.	STATEMENT OF CLAIM:
	State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how <u>each</u> defendant is involved. <u>You need not give any legal arguments or cite any cases or statutes.</u> If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.
1	. I was seen on 4/26/19 by nurse practitioner Sulee requesting to be taken off of the diet for health food meals.
3	2. I had written the medical administrator on 5/21/19 and 5/26/19 to request information about a medical fee being assessed to my inmote account
3	3. I filed an I-127 form after finding that I had been assessed a medical fee for a Chronic care related visit, after a Second I-60 response from K. Stoken
	4. On 7-19-19 I filed an I-128 form after finding that I had been denied relief from the I-127 gricuance. Finally in the month of January, 1/13/2020  5. I filed complaints with Texas Medical Board, HRDC, and TOCJ Executive Director
VI.	RELIEF:
	State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.
VII.	I request that the court grants me nominal, and punitive damages, as well as attorney fees and count cost, filing fees etc. as a form of relief no than \$5,000 dollar amount GENERAL BACKGROUND INFORMATION:
	A. State, in complete form, all names you have ever used or been known by including any and all aliases.  Marcus La Juan Jamerson
	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.
	1512785, 1704730

YES

less

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES VNO B. If your answer is "yes," give the following information for every lawsuit in which sanctions were

imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division):

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C.	Has any court ever warned or notified you that sanction	s could be imposed?	YES	_NO
D.	If your answer is "yes," give the following information for (If more than one, use another piece of paper and answer.		warning was iss	sued.
	1. Court that issued warning (if federal, give the distri	ct and division):		
	2. Case number:			
	3. Approximate date warning was issued:			
<b>.</b>			1	
Executed of	n: DATE		<u> </u>	
		(Signature of Pla	intiff)	
			,	
PLAINTI	FF'S DECLARATIONS		1	
<ul><li>2.</li><li>3.</li><li>4.</li><li>5.</li></ul>	I declare under penalty of perjury all facts presented in the and correct.  I understand, if I am released or transferred, it is my recurrent mailing address and failure to do so may result I understand I must exhaust all available administs I understand I am prohibited from brining an <i>in forma pecivil</i> actions or appeals (from a judgment in a civil a incarcerated or detained in any facility, which lawsu frivolous, malicious, or failed to state a claim upon whimminent danger of serious physical injury.  I understand even if I am allowed to proceed without prefiling fee and costs assessed by the court, which shall be inmate trust account by my custodian until the filing fee	esponsibility to keep the continuous in the dismissal of this larger ative remedies prior to auperis lawsuit if I have be action) in a court of the lits were dismissed on the high relief may be granted payment of costs, I am respected deducted in accordance were is paid.	ourt informed o wsuit.  filing this law rought three or the United States whe ground they d, unless I am uponsible for the e	f my vsuit. more while were ander
Signed thi	$\frac{15^{1}}{\text{(Day)}} \text{ day of } \frac{\text{Mey}}{\text{(month)}}$	, 20 <u>20</u> (year)		
		Marcus James Milwa Junio (Signature of Pla	erson Maa	
		(Signature of Pla	aintiff)	
above que	G: Plaintiff is advised any false or deliberately mislead stions may result in the imposition of sanctions. The nited to, monetary sanctions and the dismissal of this	sanctions the court may	1 -	

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Section II Causes of Action Form and Counts of Constitutional violations

# Plaintiff was Denied Due Process Under The Fourteenth Amendment to The Constitution.

- 6. Plaintiff incorporates paragraphs 1 through 5 as though they were stated fully herein,
- T. Defendant Stoker violated plantiff's Fourteenth Amendment right to have Due Process by failing to apply the Chronic Care programs Administrative Directives, and policy, according to The TDCJ Managed Health Care Policy Manual to plantiff's particular situation regarding plantiff's hypertension, chronic care illness,
  - 8. Defendant Stoker violated plantiff's Fourteenth Amendment right to have Due Process being the final policy enforcer as an official Manager of UTMB Medical, failed to investigate the plantiff's claim that the medical visit was an evaluation related to his chronic care diagnosis and Pollow up Chronic care visit, and apply the diagnosis of the evaluation properly.

    Therefore the plaintiff was not given the opportunity to present evidence that would prove the medical visit and evaluation were related to pre-existing condition/conditions and require exemption as so.

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Section, I Causes of Action Form and Counts of Constitutional Violations

WHEREFORE, Plaintiff respectfully prays

that this Court:

- A. Declare that the acts and omissions described herein violated Plaintiffs rights under The Constitution and laws of The United State;
- B. Order Defendants to pay compensatory and punitive damages; as well as nominal damages
- C. Order Defendants to pay reasonable attorney fees and cost; and filing fees and litigation fees as well no less than \$ 5,000
- D. Grant other just and equitable relief that this Itonorable Court deems necessary.

Respectfully submitted,

Marray Junemu

Marcus Jamerson #1704730

TUCI

O.L. Lyther Unit 1800 Luther Dr. Naugsota, Tx 77868